

PTO/SB/01 (08-03)

Approved for use through 07/31/2008. OMB 0851-0032

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# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☒ Declaration  
Submitted  
With Initial  
Filing

OR

☐ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.18 (e))  
required)

Attorney Docket Number	045453.001
First Named Inventor	SCHUBERT, Heinrich
COMPLETE IF KNOWN	
Application Number	To Be Assigned/
Filing Date	Concurrent Herewith
Art Unit	To Be Assigned
Examiner Name	To Be Assigned

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DEVICE FOR THE PRODUCTION OF ANASTOMOSES BETWEEN HOLLOW ORGANS

the specification of which

(Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.66, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(e) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
PCT/EP03/00744	PCT	01/24/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
A 123/02	AT	01/25/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/01 (08-03)

Approved for use through 07/31/2008. OMB 0451-0052  
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**DECLARATION — Utility or Design Patent Application**

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Country					Telephone			Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST INVENTOR:						<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))						Family Name or Surname			
Heinrich						SCHUBERT			
Inventor's Signature						Date			
[Signature]						6. July 2004			
Residence: City				State		Country		Citizenship	
Innsbruck						AT		AT	
Mailing Address									
Jahnstrasse 14/23									
City				State		Zip		Country	
Innsbruck						A-6020		AT	
NAME OF SECOND INVENTOR:						<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))						Family Name or Surname			
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Mailing Address									
City				State		Zip		Country	

☐ Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

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PTO/SB/81 (09-03)

Approved for use through 11/30/2005. OMB 0551-0035

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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	To Be Assigned
Filing Date	Concurrent Herewith
First Named Inventor	SCHUBERT, Heinrich
Title	Device for the Production of Anastomoses Between Hollow Organs
Art Unit	To Be Assigned
Examiner Name	To Be Assigned
Attorney Docket Number	043453.001

I hereby appoint:

☒ Practitioners at Customer Number

25,461

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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OR

☐ Firm or  
Individual Name

Address

Address

City

State

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Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/86).

**SIGNATURE of Applicant or Assignee of Record**

Name Heinrich SCHUBERT

Signature

Date

4. JULY 2004

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.21 and 1.33. The information is required to obtain or retain a patent by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 5 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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